

## PROOF OF CLAIM FORM AND INSTRUCTIONS

The Settlement Administrator must receive this form no later than **March 28, 2025** in order for it to be considered.

### *Aaron Knott, et al. versus United Water System, Inc., et al.*

United States District Court for the Western District of Louisiana, Civ. A. No. 6:23-cv-00401

**Please read all of the following instructions carefully before filling out your Claim Form.**

1. Please review the Long Form Class Notice (the “Notice”) and have the Notice with you when you complete your Proof of Claim Form. If you do not have the Notice, or if you misplaced it, a copy is available on the Settlement Website at [www.UWSSettlement.com](http://www.UWSSettlement.com) or by calling the Claims Administrator at 1-844-620-8395.
2. Under the terms of the Settlement in this Class-Action lawsuit, you may be entitled to receive a monetary award if you sustained damages as a direct result of receiving your water from United Water System, Inc. at any time between February 16, 2013 and the present. If you wish to receive this relief and if you were no longer a United Water System account holder on January 30, 2025, you must timely submit a completed Proof of Claim Form for your household to receive monetary compensation.
3. If you would like to receive a monetary award, complete the form below. Please type or print legibly in black ink.
4. If you desire an acknowledgment of receipt of your Proof of Claim Form, send it by Certified Mail, Return Receipt Requested.
5. To submit the Proof of Claim Form, you must do one of the following: (i) complete an electronic Proof of Claim Form and submit it to the Claims Administrator via e-mail to [info@UWSSettlement.com](mailto:info@UWSSettlement.com) on or before **March 28, 2025**; or (ii) complete a paper Proof of Claim Form and send it to the Claims Administrator via United States mail, postage prepaid to the Claims Administrator at P.O. Box 3637, Baton Rouge, LA 70821 postmarked by **March 28, 2025**.
6. Once your Proof of Claim Form is received, the Claims Administrator will review the Claim Form for compliance.
7. Keep a copy of your completed Proof Claim Form for your records. If your Claim is rejected, the Claims Administrator will notify you by U.S. Mail or e-mail of the rejection and the reasons for such rejection.

**CLAIM INFORMATION**

Claimant Name:

Phone Number:

Street Address:

Email Address:

City, State, Zip Code:

I hereby certify, on behalf of myself and my household, that I held an account with United Water System, Inc. and received water service in connection with said account at some point during the time period between February 16, 2013 and the present. During the time as a United Water System account holder, my household and I resided and received water service at the following address(es):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(If you resided at any additional locations at which you/ your household held an account with United Water System and at which you received water service, please include those addresses on additional pages.)

I further certify that while a United Water System Account holder and receiving water from United Water, I and my household suffered from the following damages (circle all which apply):

- |   |   |
|---|---|
| mental and emotional distress   | non-reimbursed personal expenses  |
| nuisance, annoyance, discomfort, and inconvenience  | civil trespass (deleterious water provided to your home/leased property)  |
| fear of bodily injury, fear of contracting disease, fear of increased risk of disease   | Stained/damaged/loss of clothes and/or linens,  |
| expenses for purchasing bottled water/ice<br>expense of installing water filtration system/<br>maintenance and filter replacement costs | purchase of water/ice dispensers<br>loss of use and enjoyment of real property,<br>homes and leased property(ies) |

I declare under penalty of perjury the foregoing is true and correct.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print name: \_\_\_\_\_

If you have any questions about this form or the Settlement, please contact the Claims Administrator at:

UWS Settlement Administrator  
P.O. Box 3637  
Baton Rouge, LA 70821

1-844-620-8395

[www.UWSSettlement.com](http://www.UWSSettlement.com)

You may also contact Class Counsel at:

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Please do not contact Defendants, the Court, or the Court Clerk's Office about the Settlement.